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## APPLICANTS

Doni S. Dattani, Waterloo, CANADA;

 Lowell L. Winger, Waterloo, CANADA;  
 Simon Booth, Kitchener, CANADA;
\*\* CONTINUING DATA \*\*\*\*\* *none*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CANADA	SHEETS DRAWING 10	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 3
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

## ADDRESS

 24319  
 LSI LOGIC CORPORATION  
 1621 BARBER LANE  
 MS: D-106  
 MILPITAS, CA  
 95035

## TITLE

Intra 4 x 4 modes 3, 7 and 8 availability determination intra estimation and compensation

FILING FEE  RECEIVED 786	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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